PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. 80: 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

JOSEPH SEE and BUIDLICATION SEE (if sequired). Blocks I through 5 should be completed where

maintenance lec notificat	correspondence including d below or directed oth tions.	g the Patent, advance o erwise in Block 1, by (a	rders and notification a) specifying a new c	orres	pondence address;	and/or		correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDE	ν. •	Dane	rs. Fach additional	paper.	can only be used to cate cannot be used to such as an assignmenting or transmission.	r domestic mailings of the or any other accompanying nt or formal drawing, must			
3528	7590 01/06	2011	•		Cert	lficate	of Malling or Transi	nission	
STOEL RIVES LLP - PDX					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
900 SW FIFTH AVENUE					addressed to the Mail Stop ISSUE FEE address above, or being facsimile				
SUITE 2600 PORTLAND, OR 97204-1268					(Depositor's name)				
,				⊢		_		(Signature)	
				┢				(Date)	
APPLICATION NO	ATION NO FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
09/886.659	06/21/2001		David A. Brown				42923/905	4746	
19/886,659 06/21/2001 TITLE OF INVENTION: METHOD AND APPARATUS FOR LOGICAL			David A. Blown						
					PREV. PAID ISSUI		TOTAL FEE(S) DUE	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	JUE	\$0	FEE	\$1810	04/06/2011	
nonprovisional	NO UNIER	\$1510 ART UNIT	\$300 CLASS-SUBCLASS	,	,]		\$1910	04/00/2011	
EXAMINER		2448	709-245000	_	,				
SHNGLES, RRISTIE D 2448 709-245000 799-245000 799-245000 799-24500 799-245000 799-245000 799-245									
CFR 1.363).	ence address or indicatio	(1) the names of up to 3 registered patent attorneys							
Change of corresp	or agents OR, alternatively,								
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered atomey or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 1sted, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print	or typ	pe)				
PLEASE NOTE: Uni	less an assignce is ident th in 37 CFR 3.11. Com	ified below, no assigned	data will appear on the data w	the p	atent. If an assign assignment.	ce is i	dentified below, the d	ocument has been filed for	
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)								
SAtech Group, A.B. Limited Liability Company			Wilmington, Delaware						
Please check the appropriate assignce category or eategories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity									
4a The following fee(s)	are submitted:	4	b. Payment of Fcc(s):	(Plea	ase first reapply a	ny pre	rlously paid issue fee	shown above)	
	A check is enclosed.								
Publication Fee ()	☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fcc(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-4455 (anclose as extra copy of this form).								
Advance Order -	# of Copies		overpayment, to	Depo	sit Account Numb	er 19	4455 (enclose s	n extra copy of this form)	
5 Change in Entity Sta								mp 1 07/ 1/21	
a. Applicant claim	ns SMALL ENTITY stat	us. Sec 37 CFR 1.27.					TITY status. Sec 37 C		
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fcc (if rec records of the United St	uired) will not be accept ates Patent and Trademan	k Office.	tnan	tne applicant; a reg	istered	attorney or agent, or t	he assignee or other party is	
Authorized Signature	mc/1	ell-			Date 20	>//	Apr. 1		
Typed or printed nam	Matthew C.				Registration l	No4	3,403		
This collection of informan application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, Virginia 22. Under the Paperwork R.	nation is required by 37- ntiality is governed by 3 ed application form to the tions for reducing this by Virginia 22313-1450. D 313-1450. deduction Act of 1995, no	CFR 1.311. The informal 5 U.S.C. 122 and 37 CFI to USPTO. Time will va- urden, should be sent to 1 O NOT SEND FEES OF persons are required to to	tion is required to obta R 1.14. This collection ry depending upon the the Chief Information COMPLETED FORM respond to a collection	in or is es indi Offic MS T	retain a benefit by stimated to take 12 vidual case. Any e eer, U.S. Patent and O THIS ADDRES formation unless it	the put minute ommer Trade S. SEN displa	slic which is to file (and is to complete, including the stock of the second of the se	d by the USPTO to process ng gathering, preparing, an- ime you require to complet partment of Commerce, P.O. for Patents, P.O. Box 1450 of number.	